



# Improve Health Outcomes

A GUIDE FOR PROVIDERS



PROVIDER COMMUNICATIONS

Coverage for  
every stage of life™



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# You Can Improve Your Patients' Health Outcomes and Quality of Care

*Our providers' commitment to provide the highest quality of care to their patients is vital to improving health outcomes. This includes taking actions to meet this goal:*

- *Identify and close care gaps for preventive screenings, annual exams and vaccinations.*
- *Complete timely submission of claims or encounters data.*
- *Share health education to impact patient behavior.*
- *Provide care coordination and timely access to care and services.*
- *Meet the cultural and linguistic needs of each person.*
- *Follow recommended clinical, preventive health guidelines and best practices.*

*CalViva Health and Health Net\* know the importance of working with, and helping providers in their efforts to improve their patients' health to meet quality standards. This toolkit provides information about performance measures. It also contains useful tools to support your practice.*



We have the same goal – to help improve your patients' health outcomes and provide the highest quality of care.





# Health Care Performance Measurement Systems

CalViva Health and Health Net monitor quality of care and patient experience metrics to improve patient health outcomes and satisfaction. Reporting on care and service performance metrics is required by the National Committee for Quality Assurance (NCQA) and the state's Department of Health Care Services (DHCS).

## Managed Care Accountability Set

DHCS oversees the Medi-Cal health insurance program. They require Medi-Cal managed care plans (MCPs) to meet minimum performance levels on measures key to the health of this population. DHCS informs health plans of the measures, known as the Managed Care Accountability Set, and requires performance to be reported to DHCS annually.



**MCPs must meet minimum performance levels established by DHCS for the Managed Care Accountability Set measures. CalViva Health works with providers and conducts performance improvement projects (PIPs) to address areas below benchmarks.**



# Performance Measures

THESE MEASURES ARE USED TO REPORT, COMPARE AND RATE

## Patients' experience and quality of care.



Your practice's preventive and chronic care efforts – used to determine incentive programs.



Overall performance of health plans.



Health outcomes to identify best practices or improvements needed.

Regulators use NCQA's standardized Healthcare Effectiveness Data and Information Set (HEDIS®) metrics and Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey to rate health plans. HEDIS and CAHPS measures also drive improvements in health care performance.

Providers have a direct impact on affiliated health plans and provider organization performance ratings based on patient experience and the care provided.

### HEDIS Measures

HEDIS is a set of standardized measures developed by NCQA to measure, report and compare performance across health plans. Visit the NCQA website at [www.ncqa.org](http://www.ncqa.org) for more information.

HEDIS results for health plans and provider organizations are publicly reported in the NCQA Quality Compass and state and federal Quality Report Cards. They are used by purchasers and consumers to compare performance between health plans.

### CAHPS Survey

The CAHPS survey is conducted annually on a random sample of patients. CAHPS results are used to measure patient experience with:

- ✓ Access to care.
- ✓ Care coordination.
- ✓ Getting the care needed.
- ✓ Interactions with providers.
- ✓ Services delivered by the health plan.

The CAHPS Survey Tip Sheet gives examples of survey questions. It also provides recommendations to improve providers' CAHPS performance. More information about how to improve these measures can be found in the Tips and Guidelines for Access to Care brochure on the provider portal.

### Pharmacy Measures



Pharmacy measures evaluate appropriateness and patient adherence to taking prescribed medications. This can include the percentage of patients appropriately prescribed, monitored or adherent for:

- Antidepressants
- Asthma medications
- Beta blockers
- Cholesterol medications
- Diabetes medications
- Opioids

Patient eligibility and performance on medication measures are based on evidence-based clinical guidelines and prescription claims.

### Providers have the greatest impact on:

- Prescribing appropriate treatment.
- Promoting medication adherence.
- Addressing patient barriers, such as knowledge deficits and side effects.



# Quality Improvement Activities



CalViva Health conducts patient outreach activities to promote healthy preventive and chronic care practices, including:

- Mailed materials, such as flyers, postcards, health calendars, and newsletters.
- Educational emails.
- Live and programmed calls.
- Health education classes.
- In-home visits.
- Text messaging.



CalViva Health works with providers to improve health outcomes and data capture of measures by:

- Offering weekend and extended access clinics.
- Providing online patient care gap lists.
- Data sharing, such as pharmacy/lab data and electronic medical records.
- Creating provider and patient tools.



## Incentive Programs

Your performance scores are used to measure your practice's quality improvement and preventive care efforts. Performance-based incentive programs reward participating primary care physicians (PCPs), clinics and participating physician groups (PPGs) based on care gap closures and HEDIS performance from claims and encounters data.

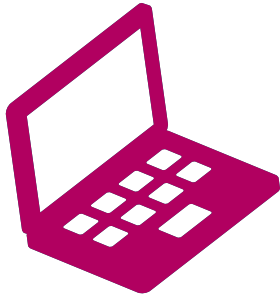
## Provider Portal

The provider portal allows easy access to:

- Patient eligibility.
- Medical policies.
- Prior authorizations.
- Quality improvement resources and tools.
- Claims status.

You must have a website account to access secure information on the provider portal. If you don't have an account, it's easy to register. If you are not able to register on the provider portal or have questions, call technical support.





# Quality Improvement Resources Online

## Navigating the Quality Improvement Corner

The Quality Improvement Department posts helpful tools on the Quality Improvement (QI) Corner in the provider portal.

### USEFUL INFORMATION ON HEALTH CARE TOPICS INCLUDES

- Access to care.
- Behavioral health.
- Care coordination.
- Disease management.
- Maternity and obstetrics.
- Patient safety.
- HEDIS tip sheets and guides.

CalViva Health encourages the use of these tools. They can be used to help patients better understand their health care. These tools also help to improve patient recall, their experience and meet quality of care standards.

## Provider Library

The online Provider Library allows providers to access relevant items in real time. This includes operations manuals, updates and letters, forms, contacts, Online News, help, and more.

## Provider Reports

The provider portal allows PPGs to access provider care gaps and report cards. These reports assist in closing care gaps and improving compliance.



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